Case 17-26865 Doc 17 Filed 01/25/18 Page 1 of 24

			Jase 17-2000) L		u 0 1/25/10 1 8	age 1 01 24		
Fill	in this inform	ation to identify	your case and th	is filing:					
Deb	tor 1	Tio D. Boon	loc Harris						
Deb	tor r	Tia D. Peop		e Name	Last	Name	 }		
	tor 2 use, if filing)	First Name	Middle	e Name	Last	Name			
	-								
Unit	ed States Ban	kruptcy Court for	r the: DISTRICT	OF MAF	RYLAND, BALTIMO	ORE DIVISION			
Cas	e number 1	7-26865							Check if this is an amended filing
Off	icial For	m 106A/E	3						
Sc	hedule	e A/B: P	roperty						12/15
think infori	it fits best. Be mation. If more ver every questi	as complete and space is needed, ion.	accurate as possible attach a separate sh	e. If two in the second to the	married people are fi	et fits in more than one of ling together, both are e of any additional pages, dave an Interest In	qually responsible fo	r supplyi	ng correct
			-						
1. Do	you own or ha	ave any legal or ed	quitable interest in a	ny reside	ence, building, land,	or similar property?			
	No. Go to Part	2.							
	Yes. Where is	the property?							
1.1				What	is the property? Che	eck all that apply			
	1230 N Ellv	wood Ave			Single-family home		Do not deduct secur		
		available, or other de	escription		Duplex or multi-unit Condominium or co	_	the amount of any s Creditors Who Have		
					Manufactured or mo	shila hama			
	Baltimore	MD	21213-3926		Land	bolle nome	Current value of th entire property?		urrent value of the ortion you own?
	City	State	ZIP Code		Investment property		\$0.	-	\$36,000.00
	·				Timeshare		Describe the nature		
					Other		(such as fee simple	e, tenancy	by the entireties, or
				Who	has an interest in the Debtor 1 only	e property? Check one	a life estate), if known Fee Simple/so		r
	Baltimore (City		_	Debtor 2 only		1 00 01111110700		
	County	<u> </u>			Debtor 1 and Debto	r 2 only			•
					At least one of the d	*	Check if this is (see instructions)	s commur	nity property
					=	sh to add about this item	, such as local		
				prop	erty identification nu	mber:			
							F		
						art 1, including any e			\$36,000.00
Part	2: Describe Y	our Vehicles					L		
						er they are registered Contracts and Unexpi		vehicles	you own that
			oort utility vehicles		-	and an arrangement			
-	No								
	Yes								

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1 Peoples-H	larris, Tia D.	Case number (if known)	17-26865
		notor homes, ATVs and other recreational vehicles, s, motors, personal watercraft, fishing vessels, snowno	· · · · · · · · · · · · · · · · · · ·	
	■ No			
	☐ Yes			
5		of the portion you own for all of your entries from		\$0.00
		or Part 2. Write that number here	=>	
		sonal and Household Items / legal or equitable interest in any of the following	itoms?	Current value of the
	o you own or have any	regal of equitable interest in any of the following	iens:	portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and Examples: Major applia □ No	I furnishings ances, furniture, linens, china, kitchenware		
	Yes. Describe	Debtor's furniture and appliances		\$1,500.00
7.		and radios; audio, video, stereo, and digital equipment; ell phones, cameras, media players, games	computers, printers, scanners; music collect	ctions; electronic devices
	☐ Yes. Describe			
8.		nd figurines; paintings, prints, or other artwork; books, p , memorabilia, collectibles	ictures, or other art objects; stamp, coin, or	baseball card collections; other
	Yes. Describe			
9.	Equipment for sports Examples: Sports, phoinstruments	tographic, exercise, and other hobby equipment; bicycle	es, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
	☐ Yes. Describe			
10	. Firearms Examples: Pistols, rifl ■ No	les, shotguns, ammunition, and related equipment		
	☐ Yes. Describe			
11	. Clothes Examples: Everyday o □ No	clothes, furs, leather coats, designer wear, shoes, acce	ssories	
	Yes. Describe	Debtor's Clothing		\$600.00
_		Deptor's Ciothing		
12	. Jewelry Examples: Everyday j	iewelry, costume jewelry, engagement rings, wedding rii	ngs, heirloom jewelry, watches, gems, gold,	silver
	☐ Yes. Describe			
13	. Non-farm animals Examples: Dogs, cats	s, birds, horses		
	☐ Yes. Describe			
14	. Any other personal a	and household items you did not already list, include	ding any health aids you did not list	

Official Form 106A/B Schedule A/B: Property page 2

Case 17-26865 Doc 17 Filed 01/25/18 Page 3 of 24

Debtor 1	Peoples-Harris, Tia D. Case number	(if known)	17-26865
☐ Yes	s. Give specific information		
		1	
	d the dollar value of all of your entries from Part 3, including any entries for pages you have attac t 3. Write that number here	hed for	\$2,100.00
Dord do 1	Describe Very Fire reial Assets		
	Describe Your Financial Assets own or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	mples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your	petition	
	posits of money mples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, broken institutions. If you have multiple accounts with the same institution, list each.	erage hous	ses, and other similar
_	sInstitution name:		
<i>Exai</i> ■ No	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name:		
	publicly traded stock and interests in incorporated and unincorporated businesses, including an tventure	interest in	n an LLC, partnership, and
■ No			
☐ Ye	s. Give specific information about them Name of entity: % of owners	hip:	
Nege Non-	ernment and corporate bonds and other negotiable and non-negotiable instruments obtable instruments include personal checks, cashiers' checks, promissory notes, and money ordersnegotiable instruments are those you cannot transfer to someone by signing or delivering them.		
■ No			
⊔ Ye:	s. Give specific information about them Issuer name:		
	rement or pension accounts mples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit o	t-sharing p	lans
☐ Yes	s. List each account separately. Type of account: Institution name:		
Your <i>Exai</i>	rity deposits and prepayments r share of all unused deposits you have made so that you may continue service or use from a company mples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications or	ompanies,	or others
■ No □ Yes	s		
	uities (A contract for a periodic payment of money to you, either for life or for a number of years)		
■ No			
	Ss Issuer name and description. ests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuit	tion progr	am.
26 U.S	S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	. 3	
■ No □ Yes	s	521(c):	
	ts, equitable or future interests in property (other than anything listed in line 1), and rights or pov	vers exerc	isable for your benefit
■ No □ Ye:	s. Give specific information about them		

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Official Form 106A/B

De	ebtor 1	Peoples-Harris, Tia D.	Case number (if known)	17-26865
26.		s, copyrights, trademarks, trade secrets, and other intellectual pro		
	Exam _l ■ No	ples: Internet domain names, websites, proceeds from royalties and licer	nsing agreements	
		Give specific information about them		
	Exam _l ■ No	ses, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooperative association holdin	gs, liquor licenses, professional licenses	
		Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you		
	■ No □ Yes.	Give specific information about them, including whether you already file	d the returns and the tax years	
	Examp	r support ples: Past due or lump sum alimony, spousal support, child support, m Give specific information	aintenance, divorce settlement, property s	settlement
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits, si unpaid loans you made to someone else	ck pay, vacation pay, workers' compensati	on, Social Security benefits;
	_	Give specific information		
31.	Exam	sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA); or	credit, homeowner's, or renter's insurance	
	■ No □ Yes.	Name the insurance company of each policy and list its value.		
		Company name:	Beneficiary:	Surrender or refund value:
32.		terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance	e policy, or are currently entitled to receive p	property because someone has
	■ No			
	☐ Yes.	Give specific information		
33.		s against third parties, whether or not you have filed a lawsuit or not ples: Accidents, employment disputes, insurance claims, or rights to su		
		Describe each claim		
34.	Other o	contingent and unliquidated claims of every nature, including cou	nterclaims of the debtor and rights to s	et off claims
		Describe each claim		
35.	Any fir ■ No	nancial assets you did not already list		
	_	Give specific information		
26	. V 44 .	the dollar value of all of your entries from Part 4, including any en	tries for names you have attached for	
30		the dollar value of all of your entries from Part 4, including any en 4. Write that number here	ines for pages you have attached for	\$0.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

Case 17-26865 Doc 17 Filed 01/25/18 Page 5 of 24

Debtor	Peoples-Harris, Tia D.		Case number (if known)	17-26865
37. Do y	you own or have any legal or equitable interest in any business-related	d property?		
■ No	p. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. Do	you own or have any legal or equitable interest in any farm- o	r commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Ex ■ N	you have other property of any kind you did not already list? kamples: Season tickets, country club membership No Yes. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$36,000.00
56. P	art 2: Total vehicles, line 5	\$0.00		
57. P	art 3: Total personal and household items, line 15	\$2,100.00		
58. P	art 4: Total financial assets, line 36	\$0.00		
59. P	art 5: Total business-related property, line 45	\$0.00		
60. P	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$2,100.00	Copy personal property to	tal \$2,100.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$38 100 00

Official Form 106A/B Schedule A/B: Property page 5

Case 17-26865 Doc 17 Filed 01/25/18 Page 6 of 24

-#	II in this informa	ntion to identify your case:				1
	ebtor 1	Tia D. Peoples-Harris First Name	Middle Name	ı	Last Name	}
	ebtor 2 pouse if, filing)	First Name	Middle Name		_ast Name	
	-					
Ur	nited States Bank	cruptcy Court for the: DIST	RICT OF MARYLAND,	BALI	IMORE DIVISION	
	ase number 17	7-26865				☐ Check if this is an amended filing
0	fficial For	m 106C				
S	chedule	C: The Prope	rty You Cla	im	as Exempt	4/16
pro out	perty you listed o	n Schedule A/B: Property (Off	icial Form 106A/B) as yo	ur sou		plying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if
spe app fun to a	ecific dollar amo plicable statutor ids—may be un	ount as exempt. Alternatively y limit. Some exemptions— limited in dollar amount. How ar amount and the value of t	 you may claim the fusuch as those for healt wever, if you claim an 	II fair h aid exem	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Pa	art 1: Identify	the Property You Claim as I	Exempt			
1.	Which set of e	xemptions are you claiming	? Check one only, even	if you	r spouse is filing with you.	
	You are clair	ning state and federal nonbank	ruptcy exemptions. 11	U.S.C	5. § 522(b)(3)	
	☐ You are clair	ning federal exemptions. 11 L	J.S.C. § 522(b)(2)			
2.	For any prope	rty you list on Schedule A/B	that you claim as exer	npt, f	ill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
		niture and appliances	\$1,500.00	•	\$1,000.00	Md. Code Ann., Cts. & Jud.
	Line from Sche	aule A/B. G. I			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(4)
	Debtor's fur	niture and appliances	\$1,500.00		\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
	Line nom ounc	date AVE. G. I			100% of fair market value, up to any applicable statutory limit	1100. 3 11 00-(0)(0)
	Debtor's Clo		\$600.00	-	\$600.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
					100% of fair market value, up to any applicable statutory limit	C C CX
3.	(Subject to adju	ou acquire the property covere	years after that for case	s filed	d on or after the date of adjustment.) 5 days before you filed this case?	

Official Form 106C

Cas	e 17-26865 Doc 17 Filed 01/2	5/18 Page 7 (of 24 	
Fill in this information to identify you	r case:			
Debtor 1 Tia D. Peoples-			eg	
First Name Debtor 2	Middle Name Last Name			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	DISTRICT OF MARYLAND, BALTIMORE DIV	ISION		
Case number 17-26865				
(if known)				if this is an
			amend	ded filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secured	by Property	•	12/15
	If two married people are filing together, both are equat, number the entries, and attach it to this form. On the			
known).				(
1. Do any creditors have claims secured by	, , , ,			
_	is form to the court with your other schedules. You h	nave nothing else to repo	ort on this form.	
Yes. Fill in all of the information b	elow.			
Part 1: List All Secured Claims		Column A	Column B	Column C
	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Seterus, Inc.	Describe the property that secures the claim:	\$45,000.00	\$0.00	\$45,000.00
Creditor's Name				
PO Box 11790	As of the date you file, the claim is: Check all that apply.			
Newark, NJ 07101-4790	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secucar loan)	ired		
Debtor 2 only	car loarly			
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 2788			
			_	
-	lumn A on this page. Write that number here:	\$45,000.0	00	
If this is the last page of your form, add the Write that number here:	e dollar value totals from all pages.	\$45,000.0	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-26865 Doc 17 Filed 01/25/18 Page 8 of 24

Fill in this infor	mation to identify your	case:			1
Debtor 1 Tia D. Peoples-Harris					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND, BALTIMORE DIVISION			
_	17-26865				
(if known)					Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
 - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 - ☐ Yes.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Te	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	
				Φ	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				To	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Case 17-26865 Doc 17 Filed 01/25/18 Page 9 of 24

Fill in this inforr	mation to identify your	case:		
Debtor 1	Tia D. Peoples-H			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND, BALTIMORE DIVISION		
_	17-26865			
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		Name, Number	, Street, City, State and ZIF	Code	
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2	Name -				
	Name				
	Number	Street			_
2.3	City		State	ZIP Code	
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4	Name				<u> </u>
	Name				
	Number	Street			_
	0''		<u> </u>	710.0	
2.5	City		State	ZIP Code	
-	Name				_
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Case 17-26865 Doc 17 Filed 01/25/18 Page 10 of 24

	Case	17 20000 200	11 1 1100 0 17207 1	io i ago io oi	21
Fill in this	s information to identify your	case:			
Debtor 1	Tia D. Peoples-H	arris			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF MARYLA	AND, BALTIMORE DIVISI	ON	
Case num	17-26865				☐ Check if this is an amended filing
Officia	l Form 106H				
	dule H: Your Cod	ebtors			12/15
1. Do No Vec 2. With Califo	er the entries in the boxes on ber (if known). Answer every of you have any codebtors? (If	the left. Attach the Addituestion. you are filing a joint case, of the left in a community property. New Mexico, Puerto Ricco	tional Page to this page. It not list either spouse as a coperty state or territory? To, Texas, Washington, and	On the top of any Add a codebtor. P (Community property	ppy the Additional Page, fill it out, litional Pages, write your name and states and territories include Arizona,
line 2	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guarantor 106E/F), or Schedule G (or cosigner. Make sure	you have listed the cr Schedule D, Schedul	e
	Number Street	State	ZIP Code	☐ Schedule G, line	
	City	Sidle	ZIF Code		
3.2	Name			Schedule D, line Schedule E/F, line Schedule G, line	ine
	Number Street	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2018 CIN Group - www.cincompass.com Schedule H: Your Codebtors Page 1 of 1

Eill	in this information to identify your ca	200							
	otor 1 Tia D. Peopl								
	<u>-114 211 65p</u>	es-Hairis							
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the:	DISTRICT OF MARY	LAND, BALTIMORE	DIVISION	_				
	se number 17-26865		_			Check if this is:			
(If Kr	nown)					☐ An amende☐ A suppleme		nostnotition o	shantar 12
						income as o			лартег тэ
0	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inco	ome							12/15
	use. If you are separated and your ch a separate sheet to this form. Ct 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
	If you have more than one job,	Employment status	☐ Employed			☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	■ Not employed	■ Not employed		☐ Not er	nployed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student o homemaker, if it applies.	_r Employer's address							
		How long employed th	nere?						
Par	t 2: Give Details About Mon	thly Income							
	mate monthly income as of the da ss you are separated.	te you file this form. If y	ou have nothing to rep	oort for an	y line	, write \$0 in the spa	ce. Include	e your non-filir	ng spouse
	u or your non-filing spouse have more e, attach a separate sheet to this form		oine the information fo	or all emplo	oyers	for that person on	the lines be	elow. If you ne	ed more
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	0.00	\$	N/A_	

Official Form 106I Schedule I: Your Income page 1

Case 17-26865 Doc 17 Filed 01/25/18 Page 12 of 24

Debto	or 1	Peoples-Harris, Tia D.	_	Case n	umber (if known)	17-2686	<u> </u>	
				For D	Pebtor 1		otor 2 or ng spouse	
	Cop	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		* \$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	925.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	925.00	\$	N/A	
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$		925.00 + \$_	N	V/A = \$	925.00
	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avoify:	ependen			Schedule	<i>J</i> . 11. + \$	0.00
		I the amount in the last column of line 10 to the amount in line 11. The res e that amount on the Summary of Schedules and Statistical Summary of Certain			•		12. \$	925.00
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?				Combine monthly i	

Official Form 106I Schedule I: Your Income page 2

SIII	in this inform	mation to identify you	r case:			1		
						O.	and water to	
Deb	tor 1	Tia D. People	s-Harris	i			eck if this is: An amended filing	
Deb	tor 2						ŭ	ving postpetition chapter 13
(Spc	ouse, if filing)						expenses as of the	following date:
Unite	ed States Ba	nkruptcy Court for the:	DISTRI	CT OF MARYLAND, BALT ON	IMORE		MM / DD / YYYY	
1	e numbe r nown)	17-26865						
Of	fficial F	orm 106J				J		
Sc	chedul	le J: Your E	xpen	ses				12/1
info (if k	ormation. If known). An	more space is need swer every question	led, attac 1.	If two married people are the another sheet to this for				supplying correct ur name and case numbe
Part 1.		scribe Your Househ oint case?	old					
	■ No. Go	o to line 2.	a senara	te household?				
		l No	и оориги	io nodomora i				
		Yes. Debtor 2 must	file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Househ	hold of Debt	or 2.	
2.	Do you h	ave dependents?	■ No					
	Do not list Debtor 2.	t Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not sta							□ No
	dependen	its names.						Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
•	_							☐ Yes
3.		expenses include s of people other tha	ın	No				
		and your dependent		Yes				
Par	t 2 [.] Est	imate Your Ongoing	a Monthl	v Expenses				
Esti exp	imate your	expenses as of you of a date after the ba	ır bankru	ptcy filing date unless your is filed. If this is a supple				
valu	ue of such	assistance and have		overnment assistance if y			Vaur aven	
(Off	ficial Form	1061.)					Your exp	C113C3
4.		al or home ownershi and any rent for the g		ses for your residence. In lot.	clude first mortgage	4.	\$	413.93
	If not incl	luded in line 4:						
	4a. Rea	al estate taxes				4a.	\$	20.00
		perty, homeowner's, o	or renter's	insurance		4b.	·	0.00
	4c. Hor	me maintenance, rep	air, and u	pkeep expenses		4c.	\$	0.00
_		meowner's associatio				4d.		0.00
5.	Additiona	al mortgage paymen	ts for yo	ur residence , such as hom	ne equity loans	5.	\$	0.00

Case 17-26865 Doc 17 Filed 01/25/18 Page 14 of 24

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Denot include gas, maintenance, bus or train fare. Do not include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance, specify 15d. \$ 17ax. \$ 17ax. \$ 17ax. \$ 17bx. Car payments for Vehicle 1 17bx. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other specify: 17d. Othe	
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. \$ Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Charitable contributions and religious donations Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. Isa. Life insurance 15a. Vehicle insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance, specify: 15d. Other insurance, specify: 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Other. Specify: 17d. Other Specify: 18 Souther and Specify: 19 South payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). Specify: 18 Souther payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). Specify: 19 Souther specify: 19 Souther specify spenses not included in lines 4 or 5 of this form or on Schedule I. Your Income. 20a. Mortgages on other property 20a. Specify: 21 South Payments of alimony, maintenance 20b. Specify: 22c. Add lines 4 through 21. 23c. Copy line 12 (your combined monthly income) from Schedule I. 23c. Copy line 12 (your combined monthly income) from Schedule I. 23c. Subtract y	100.00
6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses 11. \$ Personal care products and services Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance poor included in lines 4 or 20. 15c. Vehicle insurance 15d. Other insurance spayments: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other specify: 17d.	36.00
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Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. S Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. \$ 20b. \$ 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Calculate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 23c. Subtract your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule 1. 23a. \$ 23b. Copy your monthly expenses from your monthly income.	0.00
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23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	651.93
23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income.	
23b. Copy your monthly expenses from line 22c above. 23b\$ 23c. Subtract your monthly expenses from your monthly income.	
23c. Subtract your monthly expenses from your monthly income.	925.00
	651.93
i ne resuit is your <i>montnly net income</i> .	273.07
, , ,	
 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease modification to the terms of your mortgage? No. 	e because of a
☐ Yes. Explain here:	

Fill in this inform	mation to identify your	case.			
Debtor 1	Tia D. Peoples-H	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND, BALTIMORE DIVISION		
Case number	17-26865				
(if known)					☐ Check if this is an amended filing
btaining money ears, or both. 18		n connection with a bankı	or amended schedules. Making ruptcy case can result in fines u		
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out bankrupto	cy forms?	
■ No					
_	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
☐ Yes. N Under penal	·	that I have read the sumn	nary and schedules filed with th	— Declaration, and Śig	
☐ Yes. N Under penal	lty of perjury, I declare e true and correct.	that I have read the sumn	nary and schedules filed with th	— Declaration, and Śig	
Under penal that they are X /s/ Tia Tia D.	lty of perjury, I declare	that I have read the sumn		Declaration, and Signs is declaration and	

Case 17-26865 Doc 17 Filed 01/25/18 Page 16 of 24

Fill	in this information to identify your case:			
Deb	btor 1 Tia D. Peoples-Harris			
Dah	First Name Middle Name	Last Name		
	btor 2 Duse if, filing) First Name Middle Name	Last Name		
Unit	ited States Bankruptcy Court for the: DISTRICT OF MAR	YLAND, BALTIMORE DIVISION		
Cac	se number 17-26865			
	se number 17-26865 nown)		☐ Check	if this is an
			amend	ded filing
∩ff	ficial Form 106Sum			
		and Cartain Statistical Information		10/45
	Immary of Your Assets and Liabilities as complete and accurate as possible. If two married peop			12/15
infor	rmation. Fill out all of your schedules first; then complete r original forms, you must fill out a new Summary and che	the information on this form. If you are filing amended		
Part	rt 1: Summarize Your Assets			
			Your as	ssets
				f what you own
1.	Schedule A/B: Property (Official Form 106A/B)			
	1a. Copy line 55, Total real estate, from Schedule A/B		\$	36,000.00
	1b. Copy line 62, Total personal property, from Schedule A	/B	\$	2,100.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	38,100.00
Part	rt 2: Summarize Your Liabilities			
· ar	Cammanizo Tour Elabinto			
				abilities : you owe
			, unounc	you one
2.	Schedule D: Creditors Who Have Claims Secured by Prope 2a. Copy the total you listed in Column AAmount of claim, a		\$	45,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Office	cial Form 106E/F)		
	3a. Copy the total claims from Part 1 (priority unsecured cl	laims) from line 6e oschedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecure	ed claims) from line 6j oschedule E/F	\$	0.00
		1		
		Your total liabilities	\$	45,000.00
Part	rt 3: Summarize Your Income and Expenses			
	•			
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedu	ıle I	\$	925.00
_				
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	651.93
Part	rt 4: Answer These Questions for Administrative and St	tatistical Records		
ı an				
6.	Are you filing for bankruptcy under Chapters 7, 11, or 1 No. You have nothing to report on this part of the form.	3? Check this box and submit this form to the court with your otl	ner schedul	es.
	Yes			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumpurpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for sta	ner debts are those "incurred by an individual primarily for a peatistical purposes. 28 U.S.C§ 159.	ersonal, fam	nily, or household
	Your debts are not primarily consumer debts. You court with your other schedules.	have nothing to report on this part of the form. Check this bo	x and subm	nit this form to the

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Case 17-26865 Doc 17 Filed 01/25/18 Page 17 of 24

Debtor 1 Peoples-Harris, Tia D.

Case number (if known) 17-26865

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		ation to identify you				
De	ebtor 1	Tia D. Peoples- First Name	Harris Middle Name	Last Name		
1	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the	DISTRICT OF MARYLAN	D, BALTIMORE DIVISION		
1	nse number 1	7-26865				Check if this is an amended filing
	fficial For		Affairs for Individ	luals Filing for E	Sankruptcy	4/16
info	ormation. If mo		ble. If two married people are attach a separate sheet to the			
Pa	rt 1: Give De	etails About Your M	arital Status and Where You	Lived Before		
1.	What is your	current marital state	us?			
	☐ Married					
	■ Not marr	ied				
2.	During the las	st 3 vears. have vou	lived anywhere other than w	here vou live now?		
	_	,				
		all of the places you l	ived in the last 3 years. Do not in	oclude where you live now		
		, ,	,	,		
	Debtor 1 Price	or Address:	Dates Debtor 1 I there	ived Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	1230 N Ellv Baltimore,	vood Ave MD 21213-3926	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	es and territorie. No Yes. Mak	s include Arizona, Ca	ver live with a spouse or lega alifornia, Idaho, Louisiana, Neva medule H: Your Codebtors (Office ar Income	ada, New Mexico, Puerto Ri		
4.	Did you have Fill in the total	any income from en	mployment or from operating ou received from all jobs and al have income that you receive to	I businesses, including part-	time activities.	endar years?
	□ No					
	Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-26865 Doc 17 Filed 01/25/18 Page 19 of 24

Case number (if known) 17-26865

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.									
	List each	source and t	he gross inco	ome from each source sepa	rately. Do n	ot include income that	you listed in line 4.			
	□ No									
		. Fill in the de	etails							
	. 00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
				Debtor 1 Sources of income Describe below.	eac (bef	oss income from th source fore deductions and lusions)	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)	
	or last caler anuary 1 to	ndar year: December	31, 2017)	Social Security Benefits		\$11,100.00				
		dar year be December		Social Security Benefits		\$11,100.00				
Pa	art 3: Lis	st Certain Pa	yments You	ı Made Before You Filed t	or Bankru	ptcy				
6.	Are eithe □ No. □ Yes.	Neither De individual puring the No. Yes	ebtor 1 nor I orimarily for a 90 days befo Go to line List below creditor. D payments to adjustmen	's debts primarily consultable better 2 has primarily compersonal, family, or housely presonal, family, or housely presonal, family, or housely presonal, family, or housely presonal, family, or housely for both payments for the consultation of the payments for the consultation of the payments for the payments for the payments for the payments for the payments of t	nsumer de nold purpos did you pay paid a total domestic s uptcy case, ars after tha	ebts. Consumer debts e." y any creditor a total of of \$6,425* or more in o support obligations, su at for cases filed on or ebts.	\$6,425* or more? one or more payment as child support after the date of additional and the support of the date of additional and the support of the support of the date of additional and the support of	nts and the tol t and alimony	tal amount you paid that	
		=	0 . "	_						
					n you paid a total of \$600 or more and the total amount you paid that creditor. Do not include obligations, such as child support and alimony. Also, do not include payments to an attorney for					
	Credito	r's Name and	d Address	Dates of page	yment	Total amount paid	Amount you still owe	Was this p	ayment for	
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
	■ No □ Yes.	. List all paym	nents to an in	sider						
		s Name and		Dates of page	yment	Total amount paid	Amount you still owe	Reason for	r this payment	
8.	Within 1	year before	you filed fo	r bankruptcy, did you ma	ke any pay			ount of a de	bt that benefited an	

Case 17-26865 Doc 17 Filed 01/25/18 Page 20 of 24

Deb	btor 1 Peoples-Harris, Tia D.			Cas	e number (if known)	17-26865	
	insider? Include payments on debts guaranteed or cosi	igned by	au an insider.				
	■ No □ Yes. List all payments to an insider						
	Insider's Name and Address	Date	es of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	rt 4: Identify Legal Actions, Repossessio	ns, and	Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.						
	NoYes. Fill in the details.						
	Case title Case number		ure of the case	Court or agency		Status of th	e case
	Jophn E. Driscoll, III, Trustee v. Tia Peoples 24O17001181		rtgage eclosure	Circuit Court F City 111 N Calvert S Baltimore, MD	St	■ Pending □ On appe □ Conclude	
	■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address		cribe the Property		Date		Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bec No Yes. Fill in the details.	ıptcy, di		iding a bank or fina	ncial institution,	set off any am	ounts from your
	Creditor Name and Address	Des	cribe the action the	creditor took	Date taken	action was	Amount
Par	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes Tt 5: List Certain Gifts and Contributions Within 2 years before you filed for bankrup	another	official?		-		of creditors, a
	NoYes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 person	per	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and						

Case 17-26865 Doc 17 Filed 01/25/18 Page 21 of 24

Case number (if known) 17-26865

14.	Within 2 years before you filed for bank	kruptcy,	did you give any gifts or contributions	with a total	value of more than \$6	600 to any charity?
	NoYes. Fill in the details for each gift or of	contribution	on.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value
Pai	rt 6: List Certain Losses					
	Within 1 year before you filed for bankr or gambling?	ruptcy or	since you filed for bankruptcy, did you	u lose anyth	ing because of theft,	fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Descr	ribe any insurance coverage for the los	ss	Date of your	Value of property
	how the loss occurred		le the amount that insurance has paid. Lis		loss	lost
		insura	ance claims on line 33 of Schedule A/B: Pr	roperty.		
Pai	rt 7: List Certain Payments or Transfe	ers				
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	r preparii	ng a bankruptcy petition?			y to anyone you
	☐ No ☐ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address	Vou	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not Legal Aid Bureau, Inc.	rou	0.00			\$0.00
	500 E Lexington St Baltimore, MD 21202-3559					
17.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer that No	editors o	r to make payments to your creditors?		transfer any propert	y to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer gifts and transfers that you have already list. No	our busir rs made a	ness or financial affairs? as security (such as the granting of a secur			
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you				3	

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Case 17-26865 Doc 17 Filed 01/25/18 Page 22 of 24

Case number (if known) 17-26865

	beneficiary? (These are often called asset-protect	tion devices.)								
	No	,								
	Yes. Fill in the details. Name of trust	Description and v	alue of the prop	erty transf	ferred	Date Transfer was				
						made				
Pa	Int 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit I	Boxes, and Stor	age Units						
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associated. No	ther financial account	s; certificates o			, ,				
	Yes. Fill in the details.									
		ast 4 digits of account number	Type of accou instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for I	bankruptcy, any	safe depo	osit box or other deposi	itory for securities,				
	■ No									
	☐ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?				
Pa	rt 9: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that some someone.	one else owns? Includ	de any property	you borro	wed from, are storing f	or, or hold in trust for				
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value				
Pa	rt 10: Give Details About Environmental Inform	nation								
For	the purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a	· local statute or regul air, land, soil, surface		• .	•					

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 17-26865 Doc 17 Filed 01/25/18 Page 23 of 24

Case number (if known) 17-26865

24.	Has	any governmental unit notified you that	ınder or in violation o	f an environment	al law?				
	■ No								
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental la know it	aw, if you	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental la know it	aw, if you	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case		Status of the case			
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business						
27	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	□ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.								
	Bus	siness Name	Describe the nature of the business	Employer Ident	ification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include	Social Security nuse existed	umber or ITIN.			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	■ No								
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)		Date Issued						
Dar	Ì	Sign Below							
l hav true banl 18 U	e rea and krupt J.S.C.	ad the answers on this Statement of Fina correct. I understand that making a false cy case can result in fines up to \$250,00 §§ 152, 1341, 1519, and 3571. Peoples-Harris	e statement, concealing property, or obt	aining money or prop					
Tia	D. F	Peoples-Harris	Signature of Debtor 2						
		re of Debtor 1	Data						
Dat	e _	January 25, 2018	Date						

Case 17-26865 Doc 17 Filed 01/25/18 Page 24 of 24

Deptor 1	Peoples-Harris, IIa D.	Case number (if known)	17-26865
Did you att ■ No □ Yes	tach additional pages to Your Statement of Financial Affairs for Individ	luals Filing for Bankruptcy (Off i	icial Form 107)?
Did you pa ■ No	ay or agree to pay someone who is not an attorney to help you fill out b	pankruptcy forms?	
	ame of Person Attach the Bankruptcy Petition Preparer's Notice, Dec	claration, and Signature (Official F	Form 119).